SCC eFile	2013 ANNUAL REPORT 213558458 COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION			
1.) CORPORATION NAME:			DUE DATE:	12/31/2013
Dominion Wholesale, Inc. 2.) VA REGISTERED AGENT NA	E AND OFFICE ADDRESS:		SCC ID NO: <b>06079669</b>	
CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA			5.) STOCK I	NFORMATION AUTHORIZED
3.) CITY OR COUNTY OF VA REHENRICO COUNTY	GISTERED OFFICE:		COMMON	1,000
4.) STATE OR COUNTRY OF INC	CORPORATION:			
6.) PRINCIPAL OFFICE ADDRES	S:			
ADDRESS: 120 T	REDEGAR ST			
CITY/ST/ZIP: RIC	HMOND, VA 23219			
7.) DIRECTORS AND PRINCIPAL		nd princi nated as	pal officers must b both a director an	pe listed. An individual an officer.
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID A CHRISTIAN PRESIDENT 120 TREDEGAR ST RICHMOND, VA 23219	X Of	FFICER	X DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAMELA F FAGGERT VICE PRESIDENT 5000 DOMINION BOULEVARD INNSBROOK TECHNICAL CEN' GLEN ALLEN, VA 23060		FFICER	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BECKY C MERRITT VICE PRESIDENT 100 TREDEGAR STREET RICHMOND, VA 23219	X OI	FFICER	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARTER M REID SECRETARY 100 TREDEGAR ST RICHMOND, VA 23219	Х	FFICER	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN D SMATLAK VICE PRESIDENT 5000 DOMINION BOULEVARD INNSBROOK TECHNICAL CEN' GLEN ALLEN, VA 23060		FFICER	DIRECTOR
NAME: TITLE: ADDRESS:	FRED G WOOD III SR VP-FIN. MGT	Х	FFICER	DIRECTOR

RICHMOND, VA 23219

CITY/ST/ZIP/CO:

		χ OFFICER	DIRECTOR
NAME:	JAMES P CARNEY		
TITLE:	ASST TREASURER		
ADDRESS:	100 TREDEGAR STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
		X OFFICER	DIRECTOR
NAME:	G SCOTT HETZER		
TITLE:	SRVP TAX/TREAS		
ADDRESS:	100 TREDEGAR ST		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
		χ OFFICER	DIRECTOR
NAME:	JOHN L NEWMAN		
TITLE:	ASST TREASURER		
ADDRESS:	100 TREDEGAR STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
		X OFFICER	DIRECTOR
NAME:	CORYNNE ARNETT		
TITLE:	CONTROLLER		
ADDRESS:	701 EAST CARY STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
		X OFFICER	DIRECTOR
NAME:	SHARON L BURR		
TITLE:	ASST SECRETARY		
ADDRESS:	100 TREDEGAR ST		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
		X OFFICER	DIRECTOR
NAME:	J. DAVID RIVES		
TITLE:	SVP		
ADDRESS:	5000 DOMINION BOULEVARD		
CITY/ST/ZIP/CO:	GLEN ALLEN, VA 23060		
		χ OFFICER	DIRECTOR
NAME:	PAUL E RUPPERT		
TITLE:	SVP		
ADDRESS:	5000 DOMINION BOULEVARD		
CITY/ST/ZIP/CO:	GLEN ALLEN, VA 23060		
I AFFIRM THAT THE INFORMATION	CONTAINED IN THIS ELECT	RONIC REPORT	IS ACCURATE AND
COMPLETE AS OF THE DATE BELO			
/s/ SHARON L BURR	SHARON L BURR, ASST		12/4/2013
SIGNATURE OF DIRECTOR/OFFICER	- OFODETABY		DATE
LISTED IN THIS REPORT	PRINTED NAME AND CORP	ORATE	
	TITLE		
It is a Class 1 misdemeanor for any perso	n to sign a document, which includ	es this electronic re	cord, that is false in any material

respect with the intent that the document be delivered to the Commission for filing.